## FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines Hospital and Healthsystem Assoc. of PA - Federal Political Action Comm (HAPAC) Post Office Box 8600 ADDRESS (number and street) Check if different than previously Harrisburg PA 17105 8600 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** CITY A ZIPCODE A IS THIS **AMENDED** NEW C00128082 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 Χ PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 04 0 1 2006 06 30 2006 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Mr James M. Redmond Type or Print Name of Treasurer Electronically Filed by Mr James M. Redmond 07 07 2006 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003) Only

## SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

OF RECEIPTS AND DISBURSEMENTS

Page 2

Repo	ort Covering the Period: From:	01 2006	To: 0 6 3 0 2 0 0 6
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
(a)	Cash on Hand January 1		13550.66
(b)	Cash on Hand at  Begining of Reporting Period	16115.23	
(c)	Total Receipts (from Line 19)	44726.81	57430.35
(d)	Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	60842.04	70981.01
To	tal Disbursements (from Line 31)	50134.03	60273.00
Re	sh on Hand at Close of porting Period libtract Line 7 from Line 6(d))	10708.01	10708.01
the	bts and Obligations owed TO committee (Itemize all on hedule C and/or Schedule D)	0.00	
the	bts and Obligations owed BY committee (Itemize all on hedule C and/or Schedule D)	0.00	

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

## DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name

Hospital and Healthsystem Assoc. of PA - Federal Political Action Comm (HAPAC)

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	21375.00	32400.50
(ii) Uniterational	23316.50	24949.00
(ii) Unitemized(iii) TOTAL (add		
Lines 11(a)(i) and (ii)	44691.50	57349.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)(d) Total Contributions (add Lines	0.00	0.00
11(a)(iii),(b) and (c)) (Carry	44691.50	57349.50
Totals to Line 33, page 5)	44691.30	57349.30
2. Transfers From Affiliated/Other	0.00	0.00
Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures		
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
Refunds of Contributions Made		
to Federal candidates and Other		
Political Committees	0.00	0.00
7. Other Federal Receipts (Dividends, Interest, etc.)	35.31	80.85
Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(e) 25mm and (nom concase no)	200	2.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
9. Total Receipts (add Lines 11(d),	11700.01	F7400.0F
12, 13, 14, 15, 16, 17, and 18(c))	44726.81	57430.35
Total Federal Receipts	44700.04	F7400.05
(subtract Line 18(c) from Line 19)	44726.81	57430.35

from Line 31).....

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4 **COLUMN A COLUMN B II. DISBURSEMENTS Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 0.00 0.00 Expenditures..... (c) Total Operating Expenditures 0.00 0.00 (add 21(a)(i), (a)(ii) and (b))............ 22. Transfers to Affiliated/Other Party 50000.00 60000.00 Committees..... Contributions to 23. Federal Candidates/Committees.....and Other Political Committees..... 0.00 0.00 24. Independent Expenditure 0.00 0.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 27. Loans Made..... 28. Refunds of Contributions To: Individuals/Persons Other 0.00 0.00 Than Political Committees ..... 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) ..... (d) Total Contribution Refunds 0.00 0.00 (add Lines 28(a), (b), and (c)) ......... 134.03 273.00 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) 0.00 0.00 (i) Federal Share ..... 0.00 0.00 (ii) "Levin" Share ..... (b) Federal Election Activity Paid Entirely 0.00 0.00 With Federal Funds ..... (c) Total Federal Election Activity (add 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 50134.03 60273.00 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii)

50134.03

60273.00

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	44691.50	57349.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
85. Net Contributions (other than loans) (subtract Line 34 from Line 33)	44691.50	57349.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

S	CHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 6/31
	EMIZED RECEIPTS	or each category of the	(check only one)
11	EMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12
		, ,	13 14 15 16 17
Ar	y information copied from such Reports and Statements	may not be sold or used by any person	for the purpose of soliciting contributions
or	for commercial purposes, other than using the name and	address of any political committee to s	olicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		
$ \rangle$	Hospital and Healthsystem Assoc. of PA - Fede	ral Political Action Comm (HAPA	AC)
$\angle$			1
	Full Name (Last, First, Middle Initial)		D. (D. ).
Α.	Mr. Paul Bacharach		Date of Receipt
	Mailing Address 500 West Berkeley Street		04 05 2006
	Cit.	7:- Oada	
	City State	Zip Code	Transaction ID: 12308171
	<u>Uniontown</u> PA	15401-5514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee		500.00
	federal political committee.		0.0.00
	Name of Employer Occupa	ation	1
	Uniontown Hospital	ent & Chief Executive Officer	
		ate Year-to-Date ▼	-
	Primary General	ate rear-to-bate ¥	
	Other (specify)	500.00	
	Other (openly)		
	Full Name (Last, First, Middle Initial)		
B.	Mr. Steven P. Johnson, FACHE		Date of Receipt
	Mailing Address 777 Rural Avenue		M M / D D / Y Y Y Y
	Walling Address 777 Hurar Averlue		06 2006
	City State	Zip Code	Transaction ID: 12310699
	Williamsport PA	17701-3145	Amount of Each Receipt this Period
			7 tillount of Each recorpt tills i chod
	FEC ID number of contributing federal political committee.		500.00
	Name of Employer Occupa Susquehanna Health System	ation	
	Presid	ent and Chief Executive Officer	
	Receipt For: Aggree	ate Year-to-Date ▼	
	Primary General	500.00	Contribution
	Other (specify) ▼	500.00	
	Full Name (Last, First, Middle Initial)		
C.	Mr. Garry L. Scheib		Date of Receipt
	Mailing Address 3400 Spruce Street		0 4 1 3 2 0 0 6
	0'1-	7's Oads	
	City State	Zip Code	Transaction ID: 12346137
	Philadelphia PA	19104-4208	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee		500.00
	federal political committee.		
	Name of Employer Occupa	ntion	1
	Hospital of the University	tive Director/COO, Univ. of PA H	16
	OF I CHIRSYIV	ate Year-to-Date ▼	T
	Primary General	ate real to Bate V	
	Other (specify)	750.00	
_	LIPTOTAL of Descipts This David (antique)	_	1500.00
$\vdash$	UBTOTAL of Receipts This Page (optional)	<u> </u>	
_	OTAL This Decised (lead occur if the lead of the lead		
ĮΓ	OTAL This Period (last page this line number only)	<b>P</b>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7/31 (check only one)    X   11a
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may not be sold or used by any pers the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Hospital and Healthsystem Assoc.	of PA - Federal Political Action Comm (HA	PAC)
Full Name (Last, First, Middle Initial) Dr. William P Pearson, M.D.  Mailing Address 155 Wilson Avenue  City Washington  FEC ID number of contributing federal political committee.  Name of Employer Washington Hospital  Receipt For: Primary General Other (specify)	State Zip Code PA 15301-3398  C  Occupation Vice President Medical Affairs Aggregate Year-to-Date   500.00	Date of Receipt  M M M / D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Kirk E. Gorman Mailing Address 1566 Hancock Lane City Chesterbrook FEC ID number of contributing federal political committee.  Name of Employer Jefferson Health System	State Zip Code PA 19087-1116  C Occupation CFO	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial) Mr. David E. Loder, Esq. Mailing Address One Liberty Place  City Philadelphia  FEC ID number of contributing federal political committee.  Name of Employer Duane, Morris & Heckscher  Receipt For: Primary General Other (specify)	State Zip Code PA 19103-7301  C  Occupation Partner  Aggregate Year-to-Date   500.00	Date of Receipt  M M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional	)	1500.00
TOTAL This Period (last page this line num	ther only)	

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 8/31
	•		Use separate schedule(s) or each category of the	(check only one)
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
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Ar	ly information copied from such Reports and St for commercial purposes, other than using the	atements may	not be sold or used by any person	on for the purpose of soliciting contributions
or		name and add	aress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		5 1111 1 5 11 5 11 11	24.0
$\angle$	Hospital and Healthsystem Assoc. of P	A - Federal	Political Action Comm (HAI	
Α.	Full Name (Last, First, Middle Initial) Don V. Barbuto			Date of Receipt
	Mailing Address 20 Heron Court			04 13 2006
	City	State	Zip Code	Transaction ID: 12346317
	Phoenixville	PA	19460-1074	Amount of Each Receipt this Period
	FEC ID number of contributing	С		250.00
	federal political committee.	<u> </u>		
	Name of Employer	Occupation	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼		250.00	
_				
В.	Full Name (Last, First, Middle Initial) Mr. Louis J. Panza, Jr., CHE,			Date of Receipt
	Mailing Address 1163 Country Club Roa	ıd		M M / D D / Y Y Y Y
	City	State	Zip Code	04 14 2006
	Monongahela	PA	15063-1095	Transaction ID: 12362284
	•	1.7	13003-1093	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer	Occupation	n	
	Monongahela Valley Hospit-		t & Chief Executive Officer	
	al Receipt For:		e Year-to-Date ▼	
	Primary General			1
	Other (specify)		250.00	]
_	Full Name (Last, First, Middle Initial)			B. (B. )
C.	Mr. John Campbell  Mailing Address 70 F. Beau Street			Date of Receipt
	Mailing Address 70 E. Beau Street			04 19 2006
	City	State	Zip Code	Transaction ID: 12401119
	Washington	PA	15301-4714	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Washington Hospital	Occupation Trustee	n	
	Receipt For:		e Year-to-Date ▼	
	Primary General			1
	Other (specify)		250.00	
_				
				750.00
S	UBTOTAL of Receipts This Page (optional)	<u> </u>	······································	750.00

COLLEDING A (FEO Forms OV)				FOR LINE NUMBER: PAGE 9/31	
SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	(check only one)	
ITEMIZED RECEIPTS			or each category of the		
			Detailed Summary Page		
				13 14 15 16 17	
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	atements may name and add	not be sold or used by any perso ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
$\setminus$	NAME OF COMMITTEE (In Full)				
$\rangle$	Hospital and Healthsystem Assoc. of Pa	A - Federal	Political Action Comm (HAI	PAC)	
Α.	Full Name (Last, First, Middle Initial) Ms. Kathleen Kinslow			Date of Receipt	
	Mailing Address 16 Annesley Drive			04 19 7 2006	
	City	State	Zip Code	Transaction ID: 12401149	
	Glen Mills	PA	19342-1358	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00	
	Name of Employer Pennsylvania Hospital	Occupation Chief Ope	erating Officer		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General			7	
	Other (specify) ▼	l	250.00		
				·	
В.	Full Name (Last, First, Middle Initial) Dr. Brent J. Wagner			Date of Receipt	
	Mailing Address Sixth Avenue and Sprud	M M / D D / Y Y Y Y			
		04 19 2006			
	City	State	Zip Code	Transaction ID: 12401167	
	Reading	PA	19611-1428	Amount of Each Receipt this Period	
	FEC ID number of contributing				
	federal political committee.	C		75.00	
	Name of Employer Reading Hospital and Medi-	Occupation	1		
	cal Center	Medical S	Staff		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		205.00	1	
	Other (specify) ▼		325.00		
_	Full Name (Last, First, Middle Initial)				
C.	Mrs. Wendy Cameron			Date of Receipt	
	Mailing Address 982 E. Beau Street			M M / D D / Y Y Y Y	
	City	State	Zip Code	04 26 2006	
	Washington	PA	15301-2925	Transaction ID: 12429816  Amount of Each Receipt this Period	
		1.0	13301-2923	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00	
	Name of Employer	Occupation	1	7	
	Washington Hospital Auxiliary, The	Trustee			
	Receipt For:		Year-to-Date ▼		
	Primary General			1	
	Other (specify)	1	250.00		
				*	
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1					
_ ا	UBTOTAL of Receipts This Page (optional)			575.00	

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 10/31
	· · · · · · · · · · · · · · · · · · ·		Use separate schedule(s) or each category of the	(check only one)
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
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Ar	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	not be sold or used by any person	on for the purpose of soliciting contributions
or		name and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	Hospital and Healthsystem Assoc. of Pa	A - Federal	Political Action Comm (HAI	PAC)
A.	Full Name (Last, First, Middle Initial) Ms. Patricia J. Raffaele			Date of Receipt
	Mailing Address 125 Sherwood Drive			04 26 2006
	City	State	Zip Code	Transaction ID: 12429818
	McMurray	PA	15317-2724	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Hospital Council of Weste-	Occupation Vice Pres		7
	rn PA Receipt For:		Year-to-Date ▼	_
	Primary General	00 0		1
	Other (specify) ▼		500.00	
В.	Full Name (Last, First, Middle Initial) Mr. Scott A. Berlucchi, MA, NHA, C			Date of Receipt
	Mailing Address 763 Johnsonburg Road			M M / D D / Y Y Y Y
	011	01-1-	7'- 0-4-	04 27 2006
	City	State	Zip Code	Transaction ID: 12430392
	Saint Marys	PA	15857-3498	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Tederal political committee.			
	Name of Employer Elk Regional Health Center	Occupation		
		Presiden		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	' '	250.00	
	Other (specify)	0 0	0 0 0 0 0 0 0	J.
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Daniel D. Blough, Jr., CHE			Date of Receipt
	Mailing Address 81 Hillcrest Drive			M M / D D / Y Y Y Y
				04 27 2006
	City	State	Zip Code	Transaction ID: 12430393
	Punxsutawney	PA	15767-2616	Amount of Each Receipt this Period
	FEC ID number of contributing	С		250.00
	federal political committee.	<u> </u>		250.00
	Name of Employer	Occupation		
	Punxsutawney Area Hospital		ecutive Officer	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		250.00	1
	Other (specify)		200.00	
_				1000.00
Ls	UBTOTAL of Receipts This Page (optional)			-
				The second secon

2	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 11 / 31
	-		Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
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Ar	ny information copied from such Reports and State	tements may	not be sold or used by any perso	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from such committee.
\	NAME OF COMMITTEE (In Full)			
$\rangle$	Hospital and Healthsystem Assoc. of PA	A - Federal	Political Action Comm (HAF	AC)
	Full Name (Last, First, Middle Initial)			
۹.	Mr. Robert E. Fisher, FHFMA, CHE			Date of Receipt
	Mailing Address 100 Hospital Road			04 27 2006
	City	State	Zip Code	
	City	PA	•	Transaction ID: 12430396
	Brookville	PA	15825-1363	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Brookville Hospital	Occupation	n	7
	Brookville Hospital	President	t and Chief Executive Officer	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		250.00	
	Other (specify) ▼	0 0	250.00	
	Full Name (Last, First, Middle Initial)			
3.	Mr. Louis A. Ditzel, Jr.			Date of Receipt
	Mailing Address 1020 Thompson Street			M M / D D / Y Y Y Y
				04 27 2006
	City	State	Zip Code	Transaction ID: 12430398
	Jersey Shore	PA	17740-1794	Amount of Each Receipt this Period
	FEC ID number of contributing			250.00
	federal political committee.	C		230.00
	Name of Employer	Occupation	2	-
	Jersey Shore Hospital	President		
	Receipt For:		e Year-to-Date ▼	
	Primary General	199.19		
	Other (specify)		250.00	
	Full Name (Last, First, Middle Initial)			
Э.	Mr. John R. Stroup			Date of Receipt
	Mailing Address 426 Tippin Drive			04 27 2006
	City	State	Zip Code	Transaction ID: 12430405
	Clarion	PA	16214-2106	Amount of Each Receipt this Period
		17	10214 2100	Amount of Each Neceipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer	Occupation	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	-
	Primary General			
	Other (specify) ▼		250.00	
				750.00
S	UBTOTAL of Receipts This Page (optional)		······	750.00
т	OTAL This Period (last page this line number or	nlv)		
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 12/31
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports and Sta or for commercial purposes, other than using the n	atements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Hospital and Healthsystem Assoc. of PA			
Full Name (Last, First, Middle Initial) Dr. Luis W. Lu, MD  Mailing Address 203 Teaberry Road			Date of Receipt
Mailing Address 203 Teaberry Road  City	State	Zip Code	0 4 2 7 2 0 0 6  Transaction ID: 12430406
Saint Marys	PA	15857-2003	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer Elk Regional Health Center	Occupatio Medical I		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial)  Craig Litchfield			Date of Receipt
Mailing Address Citizens & Northern Ban PO Box 58 City	0 4 D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Wellsboro	State PA	Zip Code 16901-0058	Transaction ID: 12430473
FEC ID number of contributing federal political committee.	C	10301-0030	Amount of Each Receipt this Period  250.00
Name of Employer Laurel Health System	Occupatio	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	1
Full Name (Last, First, Middle Initial)	0 0	0 0 0 0 0 0 0	
C. Mr. Ronald J. Butler, CHE			Date of Receipt
Mailing Address 22 Walnut Street			04 / 27 / 4 2006
City	State	Zip Code	Transaction ID: 12430574
Wellsboro	PA	16901-1550	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Laurel Health System	Occupatio Presiden	t & CEO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		······	1500.00
TOTAL This Period (last page this line number or	nly)		

				_
SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 13/31
ITEMIZED RECEIPTS			or each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar	ny information copied from such Reports and State for commercial purposes, other than using the na	ements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
$\rangle$	Hospital and Healthsystem Assoc. of PA	- Federal	Political Action Comm (HAR	PAC)
Α.	Full Name (Last, First, Middle Initial) Ms. Jan E. Fisher			Date of Receipt
	Mailing Address 32-36 Central Avenue			04 27 2006
	City	State	Zip Code	Transaction ID: 12430581
	Wellsboro	PA	16901-1899	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Soldiers and Sailors Memo- rial Hospital	Occupation President	n t & Chief Executive Officer	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		250.00	1
	Other (specify) ▼	0 0	250.00	
В.	Full Name (Last, First, Middle Initial) Ms. Patricia G. Sullivan			Date of Receipt
	Mailing Address 21st Floor Penn Tower 3990 South 34th Street			04 27 2006
	City	State	Zip Code	Transaction ID: 12430627
	Philadelphia	PA	19104-4321	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer University of Pennsylvania Health Syst	Occupation Assistant	n : Vice President, Clinical Dev	,
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼		250.00	
<u> </u>	Full Name (Last, First, Middle Initial) Dr. Jody J. Foster, MD, MBA			Date of Receipt
	Mailing Address 2300 Wallace Street			0 4 2 7 2 0 0 6
	City	State	Zip Code	Transaction ID: 12430633
	Philadelphia	PA	19130-3128	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Pennsylvania Hospital	Occupation Physician	n Chair, Dept. of Psychiatry	
	Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)			750.00
$\vdash$			<u> </u>	-

C		]		FOR LINE NUMBER: PAGE 14/31
51	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		or each category of the	X 11a 11b 11c 12	
			Detailed Summary Page	
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or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and ado	r not be sold or used by any personal ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	Hospital and Healthsystem Assoc. of PA	A - Federal	Political Action Comm (HA	PAC)
Α.	Full Name (Last, First, Middle Initial) Mr. Marlin Miller, Jr.			Date of Receipt
	Mailing Address Arrow International, Inc. PO Box 12888, 3000 Be		d	05 03 7 2006
	City	State	Zip Code	Transaction ID: 12470327
	Reading	PA	19612	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Reading Hospital and Medi- cal Center	Occupation Trustee		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼ 250.00	1
	Other (specify)	0 0	250.00	
В.	Full Name (Last, First, Middle Initial) Samuel McCullough			Date of Receipt
	Mailing Address Dept of Community & Education Commonwealth Keyston	05 03 2006		
	City	Transaction ID: 12470335		
	Harrisburg	PA	17120-0001	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		50.00
	Name of Employer Reading Hospital and Medi- cal Center	Occupation	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General			7
	Other (specify) ▼		300.00	
— С.	Full Name (Last, First, Middle Initial) Dr. Bernett Johnson, Jr., MD			Date of Receipt
	Mailing Address 3400 Spruce Street			05 03 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 12470348
	<u>Philadelphia</u>	PA	19104-4208	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Hospital of the University of Pennsylv	1	al Director	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	1
	(-b), <b>4</b>		1 1 1 1 1 1 1	-
٩	UBTOTAL of Receipts This Page (optional)			550.00
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SCHEDULE A (FEC Form	1 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 15/31
ITEMIZED RECEIPTS	,	or each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Repo or for commercial purposes, other than	rts and Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Hospital and Healthsystem As:			
Full Name (Last, First, Middle Initial) Dr. Michael H. Bleshman, MD Mailing Address 1801 Blackberr	y Lane		Date of Receipt
City	State	Zip Code	0 5 0 3 2 0 0 6 Transaction ID: 12470403
Gladwyne  FEC ID number of contributing federal political committee.	C	19035-1101	Amount of Each Receipt this Period  250.00
Name of Employer University of Pennsylvania Health Syst Receipt For:  Primary General Other (specify) ▼		Professor & Vice Chair  Preserto-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  Brian L. Strom  Mailing Address 332 Hidden Riv	rer Road		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	0 5 0 3 2 0 0 6  Transaction ID: 12470421
Narberth	PA	19072-1111	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Hospital of the University of Pennsylv	Occupation Prof. of M		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial)  Dr. Stuart L. Fine, MD	•		Date of Receipt
Mailing Address 914 Sorrell Lar	e		05 04 7 2006
City	State	Zip Code	Transaction ID: 12470657
Bryn Mawr	PA	19010-1927	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer University of Pennsylvania Health Syst Receipt For:  Primary General Other (specify) ▼	Occupation Ophthaln Aggregate		Contribution
SUBTOTAL of Receipts This Page (op	otional)		750.00
TOTAL This Period (last page this line	number only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 31 (check only one)  X 11a 11b 11c 12 15 16 17
Ar or	y information copied from such Reports and Statement for commercial purposes, other than using the name at	nts may	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Hospital and Healthsystem Assoc. of PA - Fe	ederal	Political Action Comm (HAF	AC)
A	Philadelphia PA FEC ID number of contributing federal political committee.  Name of Employer University of Pennsylvania Health Syst  PA C C	ate A cupation e Dea	Zip Code 19104-4316  In an for Professional Services e Year-to-Date ▼ 250.00	Date of Receipt    M M
<b>.</b>	Mailing Address 3948 Brookridge Drive  City State Mechanicsburg PA  FEC ID number of contributing federal political committee.  Name of Employer PinnacleHealth System  Occur Phy	cupation/sicial		Transaction ID: 12507217  Amount of Each Receipt this Period  250.00
<b>D.</b>	Harrisburg PA FEC ID number of contributing federal political committee.  Name of Employer PinnacleHealth System  Occi Cha	cupationair, De	Zip Code 17105-8700  n epartment of Psychiatry e Year-to-Date ▼ 500.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
s	UBTOTAL of Receipts This Page (optional)		<b>&gt;</b>	1000.00
т	OTAL This Period (last page this line number only)		<b>&gt;</b>	

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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 17/31 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a  11b  11c  12
			Detailed Suffilliary Fage	13 14 15 16 17
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any person dress of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
$\angle$	Hospital and Healthsystem Assoc. of PA	- Federal	Political Action Comm (HAP)	AC)
A.	Full Name (Last, First, Middle Initial)  Ms. Margaret M McGoldrick			Date of Receipt
	Mailing Address 1200 York Road			05 11 / 2006
	City	State	Zip Code	Transaction ID: 12548149
	Abington	PA	19001-3788	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Abington Memorial Hospital	Occupation Executive	n e Vice President and Administ	- tr
	Receipt For:	Aggregate	Year-to-Date ▼	1
	Primary ☐ General Other (specify) ▼		250.00	
— В.	Full Name (Last, First, Middle Initial)			Data of Descipt
Б.	Mr. Richard L. Jones, Jr., FACHE Mailing Address 1200 Old York Road			Date of Receipt
				05 11 2006
	City	State	Zip Code	Transaction ID: 12548153
	Abington	PA	19001-3788	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Abington Memorial Hospital	Occupation President	n t & Chief Executive Officer	
	Receipt For:	Aggregate	Year-to-Date ▼	1
	Primary General Other (specify) ▼		500.00	
— С.	Full Name (Last, First, Middle Initial) Ms. Lorraine Pruitt			Date of Receipt
	Mailing Address 1151 George Road			05 11 2006
	City	State	Zip Code	Transaction ID: 12548159
	Meadowbrook	PA	19046-1109	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer	Occupation	1	1
	Abington Memorial Hospital		ington Memorial Hospital Bo	ar
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
_				1

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 18/31
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Hospital and Healthsystem Assoc. of			
Full Name (Last, First, Middle Initial) Professor Sankey Williams  Mailing Address 307 Brentford Road  City Haverford  FEC ID number of contributing	State PA	Zip Code 19041-1718	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
federal political committee.  Name of Employer Hospital of the University of Pennsylv Receipt For: Primary Other (specify)	Occupation Professo Aggregate		500.00
Full Name (Last, First, Middle Initial) Mr. Albert Black, Jr. Mailing Address 3400 Spruce Street			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 12578671
Philadelphia  FEC ID number of contributing federal political committee.	C	19104-4208	Amount of Each Receipt this Period  250.00
Name of Employer Hospital of the University of Pennsylv  Receipt For:  Primary General  Other (specify) ▼		n erating Officer e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial)  Mr. Keith A. Kasper  Mailing Address 1325 E. Meetinghouse	e Road		Date of Receipt
City	State	Zip Code	0 5 2 2 2 0 0 6 Transaction ID: 12578673
Lower Gwynedd	PA	19002-1302	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer University of Pennsylvania Health Syst Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼		n ance & Budget e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional) .			1250.00
TOTAL This Period (last page this line numbe	r only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 31 (check only one)  X 11a 11b 11c 12
An	y information copied from such Reports and Stateme for commercial purposes, other than using the name	ents may	not be sold or used by any perso	n for the purpose of soliciting contributions
$\frac{\Box}{}$	NAME OF COMMITTEE (In Full)  Hospital and Healthsystem Assoc. of PA - F			
Α.	Clarion P FEC ID number of contributing federal political committee.  Name of Employer Clarion Hospital Occ	ccupation resident	Zip Code 16214-8599  & Chief Executive Officer Year-to-Date ▼  250.00	Date of Receipt    M M
3.	Full Name (Last, First, Middle Initial) Robert H. Zentz Mailing Address 3410 Musselman Court  City S Whitehall P  FEC ID number of contributing federal political committee.	State PA	Zip Code 18052-3332	Date of Receipt  M M M / 22 / 2006  Transaction ID: 12580028  Amount of Each Receipt this Period  250.00
	Re	etired	Year-to-Date ▼ 250.00	
C.	Havertown  FEC ID number of contributing federal political committee.  Name of Employer University of Pennsylvania Health Syst	ccupation	Zip Code 19083-1619 Year-to-Date ▼	Date of Receipt    M M
SI	JBTOTAL of Receipts This Page (optional)			750.00
т	OTAL This Period (last page this line number only)		•	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 31 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and States for commercial purposes, other than using the nan	ments may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Hospital and Healthsystem Assoc. of PA	- Federal	Political Action Comm (HAF	AC)
Α.	University of Pénnsylvania Health Syst Receipt For:	State PA C Occupation Vice Pres	Zip Code 19104-4316 n sident, Business Developmer e Year-to-Date ▼	Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Primary General Other (specify) ▼	0 0	250.00	
3.	University of Pennsylvania Health Syst	State PA C Occupation Senior V.	Zip Code 19104-6110  n. P. for Public Affairs e Year-to-Date ▼	Date of Receipt    M M
	Primary General Other (specify) ▼		250.00	
<b>D.</b>	University of Pénnsylvania Health Syst		Zip Code 19104-4316  n e Director e Year-to-Date ▼	Date of Receipt    M   M   22   2006   Transaction ID: 12580068   Amount of Each Receipt this Period   250.00
s	UBTOTAL of Receipts This Page (optional)		······•	750.00
T	OTAL This Period (last page this line number only	v)	<b>)</b>	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 21 / 31	
ITEMIZED RECEIPTS			or each category of the	(check only one)	
••	EMIZED REGEN 10		Detailed Summary Page	X 11a 11b 11c 12	. –
Δ.	we information against from a rob Departs and Cta	stamonto mai	, not be cold or used by one norse		17
or	ly information copied from such Reports and Sta for commercial purposes, other than using the n	iame and add	dress of any political committee to	solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)		_		
$\rangle$	Hospital and Healthsystem Assoc. of PA	A - Federal	Political Action Comm (HAF	AC)	
	Full Name (Last, First, Middle Initial)				
Α.	Alvin J. Harper			Date of Receipt	
	Mailing Address 500 Commonwealth Dri	ve		05 25 2006	
	City	State	Zip Code	Transaction ID: 12588048	
	Warrendale	PA	15086-7513	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.				500.00	
	Name of Employer Hospital Council of Weste-	Occupation President			
	rn PA Receipt For:	1	Year-to-Date ▼		
	Primary General	33 -3			
	Other (specify) ▼	0 0	500.00		
— В.	Full Name (Last, First, Middle Initial) Robert J. Russell			Date of Receipt	
	Mailing Address 510 Justice Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: 12605449	
	Marlton	NJ	08053-5345	Amount of Each Receipt this Period	_
	FEC ID number of contributing federal political committee.	C		250.00	
	Name of Employer Presbyterian Medical Cent-	Occupation	า	7	
	er of the Uni	Administ	rator		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	250.00		
<u> </u>	Full Name (Last, First, Middle Initial) Dr. R. Nick Bryan, MD			Date of Receipt	
٠.	Mailing Address 316 South Front Street			M M / D D / Y Y Y Y	
				06 05 2006	
	City	State	Zip Code	Transaction ID: 12605455	
	<u>Philadelphia</u>	PA	19106-4310	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00	
	Name of Employer	Occupation		7	
Hospital of the University of Pennsylv  Radi					
	Receipt For:	Aggregate	e Year-to-Date ▼		
Primary General Other (specify) ▼			250.00		
	Other (specify)		0 0 0 0 0 0 0		
s	UBTOTAL of Receipts This Page (optional)		<b>&gt;</b>	1000.00	]
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T	OTAL This Period (last page this line number or	nly)			4

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 22/31
ITEMIZED RECEIPTS			or each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12
			, 3	13 14 15 16 17
Ar or	ny information copied from such Reports and State for commercial purposes, other than using the nar	ements may me and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.
abla	NAME OF COMMITTEE (In Full)			
$\rangle$	Hospital and Healthsystem Assoc. of PA	- Federal	Political Action Comm (HAI	PAC)
Α.	Full Name (Last, First, Middle Initial) Dr. Bert W. O'Malley, MD			Date of Receipt
	Mailing Address 133 Old Gulph Road			06 05 7 2006
	City	State	Zip Code	Transaction ID: 12605459
	Wynnewood	PA	19096-1016	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	University of Pénneylyenie	Occupation Physician		
		Aggregate	Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼	0 0	250.00	
В.	Full Name (Last, First, Middle Initial) Mr. Ralph W. Muller			Date of Receipt
	Mailing Address 21st Floor Penn Tower 3990 South 34th Street	06 05 2006		
	City	State	Zip Code	Transaction ID: 12605462
	Philadelphia	PA	19104-4321	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	University of Pénnsylvania Health Syst		cutive Officer Year-to-Date ▼	
	Other (specify) ▼	0 0	500.00	
<u>С</u> .	Full Name (Last, First, Middle Initial) Dr. Stephen R. Whitmoyer, MD			Date of Receipt
	Mailing Address 16 Hummingbird Road			0 6 D D 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 12605489
	Wyomissing	PA	19610-2815	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Good Samaritan Hospital	Occupation Medical D		
	Receipt For:	Aggregate	Year-to-Date ▼	7
	Primary General Other (specify) ▼			
s	UBTOTAL of Receipts This Page (optional)			1250.00
$\vdash$				-

2	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 23/31
	-		Use separate schedule(s) or each category of the	(check only one)
IT	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			Detailed Guillinary Fage	13 14 15 16 17
An	y information copied from such Reports and Stat	tements may	not be sold or used by any perso	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
$\rangle$	Hospital and Healthsystem Assoc. of PA	\ - Federal	Political Action Comm (HAF	PAC)
Δ.	Full Name (Last, First, Middle Initial) Mr. Christopher P. Markley, Esq.			Date of Receipt
	Mailing Address 409 South Second Stree	t		M M / D D / Y Y Y Y
	PO Box 8700	·		06 05 2006
	City	State	Zip Code	Transaction ID: 12606638
	Harrisburg	PA	17104-1612	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		250.00
	Name of Employer PinnacleHealth System	Occupation	n Community & Gov't Relations	
	Receipt For:		Year-to-Date ▼	
	Primary General	39 -3		
	Other (specify) ▼		250.00	
3.	Full Name (Last, First, Middle Initial) Mr. Craig B. Wisman			Date of Receipt
	Mailing Address P.O. Box 8700			M M / D D / Y Y Y Y
				06 05 2006
	City	State	Zip Code	Transaction ID: 12606643
	Harrisburg	PA	17105-8700	Amount of Each Receipt this Period
	FEC ID number of contributing		1 1 1 1 1	250.00
	federal political committee.	C		230.00
	Name of Employer	Occupation	2	-
	Name of Employer PinnacleHealth System	Administ		
	Receipt For:		Year-to-Date ▼	-
	Primary General	riggrogate	real to Bate V	
	Other (specify)		250.00	
			0 0 0 0 0 0 0	
	Full Name (Last, First, Middle Initial)			
Э.	Ms. Michele M. Volpe, CHE			Date of Receipt
	Mailing Address 39th & Market Streets			M M / D D / Y Y Y Y
	011	01-1-	7'. 0. 4.	06 05 2006
	City	State	Zip Code	Transaction ID: 12606645
	<u>Philadelphia</u>	PA	19104	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Presbyterian Medical Cent-	Occupation		
	er of the Uni		Director & CEO	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	' '	250.00	
	Other (specify) ▼			1
S	UBTOTAL of Receipts This Page (optional)			750.00
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Т	OTAL This Period (last page this line number on	ıly)	<b>)</b>	

SC	CHEDULE A (FEC Form 3X)		Harris and a selection of the selection (s)	FOR LINE NUMBER: PAGE 24/31
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
	EIVIIZED RECEIP I S		Detailed Summary Page	X 11a 11b 11c 12
_				13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
$\rangle$	Hospital and Healthsystem Assoc. of PA	A - Federal	Political Action Comm (HAF	PAC)
۹.	Full Name (Last, First, Middle Initial) Dr. Jo Buyske, MD			Date of Receipt
	Mailing Address 2109 Lombard			06 05 7 2006
	City	State	Zip Code	Transaction ID: 12606668
	Philadelphia	PA	19146-1216	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer University of Pennsylvania Health Syst	Occupation Physician		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		250.00	1
	Other (specify) ▼	0 0	250.00	
3.	Full Name (Last, First, Middle Initial) Mr. Charles Cladel, Jr.			Date of Receipt
	Mailing Address 503 North 21st Street	06 7 7 2006		
	City	State	Zip Code	Transaction ID: 12613199
	Camp Hill	PA	17011-2288	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Holy Spirit Hospital	Occupation Administr		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
).	Full Name (Last, First, Middle Initial) Mr. Robert Dietz			Date of Receipt
	Mailing Address Gannett Fleming, Inc. PO Box 67100			06 07 7 2006
	City	State	Zip Code	Transaction ID: 12613208
	Harrisburg	PA	17106	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer	Occupation Engineer		
	Receipt For:	<u> </u>	Year-to-Date ▼	7
	Primary General		250.00	1
	Other (specify) ▼		250.00	
SI	JBTOTAL of Receipts This Page (optional)			750.00
т	OTAL This Period (last page this line number or	าly)	<b>)</b>	

_		1		FOR LINE NUMBER: PAGE 25/31
5	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		or each category of the		
			Detailed Summary Page	
_				13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	atements may name and add	r not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
	Hospital and Healthsystem Assoc. of Pa	A - Federal	Political Action Comm (HAI	PAC)
Α.	Full Name (Last, First, Middle Initial) Ms Meghan Patton			Date of Receipt
	Mailing Address 1200 York Road			06 / 08 / 2006
	City	State	Zip Code	Transaction ID: 12615727
	Abington	PA	19001-3788	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Abington Memorial Hospital	Occupation Director I	n Human Resources	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
— В.	Full Name (Last, First, Middle Initial) John Kelly, M.D.			Date of Receipt
٥.	Mailing Address 1200 Old York Road			<b>─</b> │
		Ctata	7'a Cada	06 08 2006
	City	State	Zip Code	Transaction ID: 12615739
	Abington	PA	19001-3788	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Abington Memorial Hospital	Occupation Chairman	n n., Dept of Medicine	
	Receipt For:	Aggregate	Year-to-Date	
	Primary General Other (specify) ▼		250.00	]
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Geoffrey W. Jackson			Date of Receipt
	Mailing Address 470 Mallard Circle			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 12615747
	Blue Bell	PA	19422-2409	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Fourjay Foundation	Occupation Administr		
	Receipt For:  ☐ Primary ☐ General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)			750.00
$\vdash$			<u> </u>	_

SC	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 26 / 31 (check only one)
ITI	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
			Detailed Summary Fage	13 14 15 16 17
Any or f	y information copied from such Reports and State or commercial purposes, other than using the na	ements may	not be sold or used by any perso	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$\rangle$	Hospital and Healthsystem Assoc. of PA	- Federal	Political Action Comm (HAF	PAC)
_	Full Name (Last, First, Middle Initial) Mr. Michael B. Walsh			Date of Receipt
	Mailing Address 1200 Old York Road			06 08 2006
	City	State	Zip Code	Transaction ID: 12615759
	Abington	PA	19001-3788	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Abington Memorial Hospital	Occupation VP Finan		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
_	Full Name (Last, First, Middle Initial) Mr. Daniel Toran			Date of Receipt
	Mailing Address 616 Creek Lane			06 / 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 12615763
	Flourtown	PA	19031-1113	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer PML	Occupation President		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
_	Full Name (Last, First, Middle Initial) Theodore W. Brickman, Jr.			Date of Receipt
	Mailing Address 3219 Buck Road			06 / 08 / Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 12615767
	Huntingdon Valley	PA	19006-4702	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Brickman Grove	Occupation Architect		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
SI	JBTOTAL of Receipts This Page (optional)			750.00

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

PAGE 27/31 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 l 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Hospital and Healthsystem Assoc. of PA - Federal Political Action Comm (HAPAC) Full Name (Last, First, Middle Initial) Date of Receipt Mr. Richard L. Seim Mailing Address 1001 South George Street 06 2006 8 0 Zip Code City State Transaction ID: 12615769 **Yor**k PA 17403-3676 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer York Hospital Occupation President Aggregate Year-to-Date ▼ Receipt For: General Primary 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Edward K. Asplundh Date of Receipt Mailing Address 450 Tomlinson Road 0 6 8 0 2006 City State Zip Code Transaction ID: 12615772 **Huntingdon Valley** PA 19006-4818 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Retired Receipt For: Aggregate Year-to-Date ▼ Primary General Contribution 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. Dr. Peter D. Quinn, DMD, MD Date of Receipt Mailing Address 3400 Spruce Street 2006 06 22 Citv State Zip Code Transaction ID: 12659283 Philadelphia PA 19104-4208 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer Hospital of the University Occupation Oral & Maxilliofacial Surgeon of Pennsylv Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional) .....

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 31 (check only one)  X 11a 11b 11c 12 13 14 15 16 17					
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions					
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Hospital and Healthsystem Assoc. of PA	Federal	Political Action Comm (HAF	PAC)					
<b>A.</b>	Full Name (Last, First, Middle Initial) Dr. Richard Salcido, MD  Mailing Address 1660 Minden Lane  City  Malvern  FEC ID number of contributing federal political committee.  Name of Employer Hospital of the University of Pennsylv  Receipt For:  Primary General Other (specify)	State PA  C Occupation Physician Aggregate		Date of Receipt  M M M / 22 / 2006  Transaction ID: 12659291  Amount of Each Receipt this Period  250.00					
3.	Full Name (Last, First, Middle Initial) Dr. Kevin P. Caputo, MD Mailing Address 2600 West Ninth Street			Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	City Chester FEC ID number of contributing federal political committee.	State PA	Zip Code 19013-2098	Transaction ID: 12667786  Amount of Each Receipt this Period  250.00					
	Name of Employer Crozer-Chester Medical Ce- nter Communit Receipt For:  Primary General  Other (specify) ▼		n/Vice President e Year-to-Date ▼ 250.00						
<b>D.</b>	Full Name (Last, First, Middle Initial) Mr. Corliss Boggs Mailing Address 240 Golf View Road			Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	City Ardmore FEC ID number of contributing federal political committee.	State PA	Zip Code 19003-1002	Transaction ID: 12667797  Amount of Each Receipt this Period  250.00					
	Name of Employer Crozer-Keystone Health System Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Trustee Aggregate	e Year-to-Date ▼ 250.00						
s	UBTOTAL of Receipts This Page (optional)			750.00					
T	OTAL This Period (last page this line number on	lv)							

## **SCHEDULE A (FEC Form 3X)**

FOR LINE NUMBER: PAGE 29/31 Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c Detailed Summary Page 13 14 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Hospital and Healthsystem Assoc. of PA - Federal Political Action Comm (HAPAC) Full Name (Last, First, Middle Initial) Mr. Bruce Fischer Date of Receipt Mailing Address Healthplex Pavilion II 06 27 2006 100 West Sproul Ave City State Zip Code Transaction ID: 12667900 Springfield PA 19064-2027 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Trustee Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	250.00
TOTAL This Period (last page this line number only)	<b>•</b>	21375.00

# SCHEDULE B (FEC Form 3X)

ITEMIZED DISBURSEMENTS		Use seperate schedule(s)	_		OR LINE heck only	NUMBER: one)			L	PAGE 3		0 / 31	
		for each category of the Detailed Summary Page		Ë	21b 27	<b>–</b> ′		23 28b	22	4 Bc	25 29	26 30b	
	y Information copied from such Reports and Statem for commercial purposes, other than using the name											ıs	
VI	NAME OF COMMITTEE (In Full)	and address of any politica	i Com	11111	ilee io soi	icit conti	IIDUI	10115 111	om suc	TI COITI	millee		
$\rangle$	Hospital and Healthsystem Assoc. of PA -	Federal Political Action	Com	nm	(HAPA	C)							
_	Full Name (Last, First, Middle Initial)					Trans	sact	ion ID:	1243	 2797			
Α.	AHAPAC-American Hospital Association Federal PAC					Date of Disbursement							
	Mailing Address 325 Seventh Street, N.W. Suite 700					o <sup>™</sup> 4	IVI	1	9 /		ž 0 ŏ 6	6	
	City State Zip Code Washington DC 20004						Amount of Each Disbursement this Period						
	Washington DC 20004 Purpose of Disbursement							-		2	0000.	00	
	AHAPAC 2ND TRANSFER 4/19/06 011												
	Candidate Name			ate Ty	gory/ oe								
	Senate President	ement For: Primary General Other (specify)				AHAF 06	PAC	2ND	TRAN	1SFE	R 4/19	9/-	
	State: District:												
В.	Full Name (Last, First, Middle Initial)  AHAPAC-American Hospital Association Federal PAC				Transaction ID: 12627606  Date of Disbursement								
	Mailing Address 325 Seventh Street, N.W. Suite 700					0 <sup>M</sup> 6	М	<sup>′</sup> D0	) 1 /	Y	ž 0 ŏ 6	6 Y	
	,	State Zip Code DC 20004				Amou	ınt o	f Each	Disbu	rsemer	nt this f	Period	
	Purpose of Disbursement	20001								2	0000.	00	
	AHAPAC 3RD TRANSFER 6/1/2006			01									
	Candidate Name			ate Ty	gory/ oe								
	Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	<u> </u>			AHAF 006	PAC	3RD	TRAN	1SFE	R 6/1/	2-	
	State: District:												
C.	Full Name (Last, First, Middle Initial) AHAPAC-American Hospital Association Federal PAC							isburs		2720			
	Mailing Address 325 Seventh Street, N.W. Suite 700					0 <sup>M</sup> 6	М	<sup>/</sup> 1	<b>4</b> /	Y 2	ž 0 ŏ 6	3 Y	
	City Washington	State Zip Code DC 20004				Amou	ınt o	f Each	Disbu	rsemer	nt this f	Period	
	Purpose of Disbursement AHAPAC 4TH TRANSFER 6/14/2006 011				1	L.				1	0000.	00	
	Candidate Name Category/												
	Office Sought: House Disburse Senate President	ement For:    Primary   General     Other (specify)   \(\bigvert	l			AHAF 2006	PAC	4TH	TRAN	ISFE	R 6/14	l/-	
_	State: District:												
s	UBTOTAL of Disbursements This Page (optional)				<u> </u>					50	0000.	00	
Т	OTAL This Period (last page this line number only)	·			•					50	0000.0	00	

S	CHEDULE B (FEC Form 3X)		LEODLING	NUMBER. DAGE 01/01
		Use seperate scriedule(s)	(check onl	NUMBER: PAGE 31 / 31
П	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b	22 23 24 25 26
		Detailed Summary Fage	27	28a 28b 28c X 29 30b
An	y Information copied from such Reports and	Statements may not be sold or used	by any person	for the purpose of solicating contributions
	for commercial purposes, other than using th			
Λ	NAME OF COMMITTEE (In Full)			
17	Hospital and Healthsystem Assoc. of	f PA - Federal Political Action (	Comm (HAPA	(C)
$\mathbb{L}$				
^	Full Name (Last, First, Middle Initial)			Transaction ID: 12470553
Α.	PNC Bank			Date of Disbursement
	Mailing Address P.O. Box 8874			05 03 2006
	F.O. Box 6874			
	City	State Zip Code		Amount of Each Disbursement this Period
	Camp Hill	PA 17001-8874		
	Purpose of Disbursement			39.40
	April 2006 bank fees		001	
	Candidate Name		Category/	
			Туре	
		isbursement For:		April 2006 bank fees
	Senate   President	Primary General Other (specify) ▼		·
	State: District:	Ctrief (specify)		
_	Full Name (Last, First, Middle Initial)			
В.	PNC Bank			Transaction ID: 12613889  Date of Disbursement
	THO Barm			
	Mailing Address P.O. Box 8874			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State Zip Code PA 17001-8874		Amount of Each Disbursement this Period
	Camp Hill	PA 17001-8874		55.63
	Purpose of Disbursement May 2006 bank fees		001	
	Candidate Name		Category/	
	Sandidate Harie		Type	
	Office Sought: House Di	isbursement For:	71	
	Senate	Primary General		May 2006 bank fees
	President	Other (specify) ▼		
	State: District:	_		

1		
SUBTOTAL of Disbursements This Page (optional)		95.03
TOTAL This Period (last page this line number only)	•	95.03